Headquarters U.S. Air Force

Integrity - Service - Excellence

Aggregate Audits - Targeting Low Hanging Fruit

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Objectives

- Know common coding errors
  - Diagnosis
  - Evaluation and Management
  - Current Procedural Terminology (CPT) procedures
  - Healthcare Common Procedure Coding System (HCPCS)
- Identify errors in aggregate data

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Common Diagnosis Coding Errors

- Aftercare (still healing) versus follow-up (seen 6 months later) versus fracture (initial treatment)
- Pap Smear – need to justify Q0091, coding V72.3 does not specify if a pap is done or not, so must code V76.2 to indicate routine cervical pap smear or V15.89 other specified personal history presenting hazard to health
  - BOTTOM LINE: **Q0091 is used with one of the following codes: V76.2, V76.49, or V15.89**
- Resolved conditions – do not code – see if f/u approximately equal procedures or diseases that need follow up
- Rule out/probable/possible – seeing MI in clinics (it would probably have been admitted and become part of the admission)

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Common Diagnosis Coding Errors

- Both specific and NOS (e.g., 401.1 and 401.9 in same clinic)
- Sequencing
  - Primary Diagnosis - Physical as first code (except for V70.5 6 – but we are working on that)
- Using Correct Physical Codes –
  - V70.0 Physical for non-active duty (e.g., retiree, family member)
  - V70.3 Sport/school/camp physical
- E-Codes
  - Cannot be primary diagnosis
  - Need for injuries
- DoD Unique Code Extenders
  - V70.5__ x Health Exam of Defined Subpopulation – see following slides for additional explanations

V70.5 – must have extender

- V70.5 0 Armed Forces Medical Exam - used for pre-enlistment exams. This is an initial qualifying exam, a "yes" test that someone meets the requirements to join the military. Usually these are done by a civilian provider. They may be done for dependents planning to join the military.

- V70.5 1 Aviation Exam - a subset of the occupational exam. This is the initial qualifying and recurring exam, usually done on an annual basis. Usually done in Flight Medicine.

V70.5 – must have extender

- V70.5 2 Periodic Prevention Exam - This was the "20, 25, 30, 35... year old" active duty exam. As the standard of care changes, the frequency of this may decrease.
  - Not to be confused with the preventive health assessment *(PHA)* by a technician; assessment is an administrative issue and *not coded* .
  - Also, not to be confused with a PHA done by a privileged provider. This is coded with ICD-9-CM V68.0, medical certificate of fitness; E&M is 99420.

- V70.5 3 Occupational Exam - Used for both initial qualifying and recurring exams for individuals working in a specific occupation. Yes, aviation exams are occupational exams, but for the aviators there is a separate extender (use V70.5 1 for aviation exams).

V70.5 – must have extender

- V70.5 4 Pre-deployment Exam - done specifically because someone is deploying. At a minimum, the exam will be individualized based on the location, anticipated medical care in the area, and anticipated physical duties. Note: This can be performed on active duty as well as civilians.

- V70.5 5 During Deployment Exam - any exam while deployed that does not qualify for any of the other extenders. For instance, an aviation exam while deployed is coded as an aviation exam.

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V70.5 – must have extender

- V70.5 6 Post Deployment Exam - an exam specifically performed after a deployment, because an individual was deployed.
  - Primary diagnosis if exam is due to returning from a deployment.
  - Additional diagnosis if patient or provider suspects the condition was due to the deployment. For instance, a child starts bedwetting when the mother is deployed.

- V70.5 7 Fitness for Duty Exam - used when the primary reason a patient is seen is for profile changes, to be cleared for occupational activities, to be taken off "Duties Not Including Flying/Controlling", for "up chit", etc. For instance, a flyer was DNIF due to sinusitis. The flyer returns to be taken off DNIF, not because the standard of care for sinusitis requires a follow-up. This is also for TDRLs, PDRLs and MEBs.

V70.5 – must have extender

- V70.5 8 Accession Exam - a baseline, usually for new recruits, officers and cadets. Usually done at Paris Island (Marines), Lackland (Air Force), Great Lakes and San Diego (Navy) and who knows where for the Army.

- V70.5 9 Termination Exam - for retirement or separation, for both optional and required exams.

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Common E&M Coding Errors

- New versus Established Office Visits
  - When a specialist is called to the ER, it is usually for a referral (the ER is asking for “evaluate and treat”) so code an office visit instead of a consult
  - New – not treated by anyone in your group practice in the past three years – will anticipate 10-20% new
    - Tend to be undercoded in primary care clinics and overcoded in specialty clinics – teach people screening patients to annotate if the patient is “new”
- Inpatient Consults – when advising on treating a patient that is not admitted by a provider in your service – hardly ever see these coded

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Common E&M Coding Errors

- Return to duty/up chits – hardly ever see E&M codes 99455 or 99456
- Nurses should only code 99211 (not advanced practice, they may code other than 99211) – but see in nurse clinics such as Coumadin Clinic using other E&Ms
- Expect Bell curves for the 9920x, 9921x, 9924x, 9928x – but don't always see them,
  - Usually xxxx3 with the most, fewer xxxx2, fewer xxxx4, fewer xxxx1 and almost never xxxx5 (strongly recommend auditing any 99xx5 codes)
  - In Internal Medicine, depending on where long term drug therapy is coded, 99214 may be the most

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Common E&M Coding Errors

- Clinics that usually only do procedures – anticipate majority of these will use E&M code 99499 for privileged provider, 99211 for technicians and nurses
  - Mental Health/Life Skills (anticipate 95+%)
  - Occupational and Physical Therapy (split between 99499 and 9940x/99411/99412)
  - Nutritional Medicine (split between 99499 and 9940x/99411/99412)
  - Optometry (anticipate 95+%)
  - Ophthalmology (anticipate 50+%)
  - Allergy

Common Procedure/HCPCS Coding Errors

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Adjunct (read that as “Add junk”) codes – consider them if you will use them

- 99050 After hours service (not ER)
- 99052 Services between 2200-0800 (not ER)
- 99054 Services on Sunday/holiday (not ER)
- 99056 Services not in Office that could have been in Office (e.g., in ESD)
- 99058 Office services on emergency basis (emergency = delay in tx of pt would lead to significant increase in threat to life or body part)

- 93000 EKGs – get them coded

Common Procedure/HCPCS Coding Errors

- 99000 – intended when transporting off campus, lab claims if lab ships off to reference lab
- Labs and Rads interpreted elsewhere (e.g., 87110 Chlamydia culture - coded 151 times in AFMS in Jun 03)

- Cast versus Treatment of Fracture – see lots of diagnoses of broken bones, but few “treatment of fractures”
- Casts after initial treatment
  - Cast includes removal of cast
  - Exception: 29700 – be careful if you use this, it is for things like removing body casts

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
11101	Biopsy, skin **add-on**	0.63	not as 1st code,add-on	18
11201	Remove skin tags add-on	0.43	not as 1st code,add-on	18
11901	Added skin lesions injection	1.19	not as 1st code,add-on	9
15850	**Removal of sutures**	1.12	no	90
15851	Removal of sutures	1.25	no	31
15852	Dressing change,not for burn	1.29	no	80
26750	Treat finger fracture, each	4.3	only 8 in AFMS in June?	8
28899	Foot/toes surgery procedure	0	okay DM foot check	102
29280	Strapping of hand or finger	0.89	only 7 in AFMS in June?	7
29700	**Removal/revision of cast**	0.93	doubt,few only	44
36000	Place needle in vein	0.24	CCI	805
36410	Non-routine bl draw > 3 yrs	0.24	doubt,non-routine	37
36415	Routine venipuncture	0	why?	1408

Using AFMS data for month of June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
57410	**Pelvic exam under anesthesia**	2.92	in GYN	89
58340	**Catheter for hysterography**	1.29	not as 1st code	5
59051	**Fetal monitor/interpret only**	1.18	doubt,consulting physician	43
59400	Obstetrical care	43.29	NO unless Nellis	15
59425	Antepartum care only	7.57	NO unless Nellis	8
59426	Antepartum care only	13.07	not unless Nellis	5
59430	Care after delivery	3.49	NO unless Nellis	7
70350	**X-ray** head for orthodontia	0.64	no	8
7xxxxx	**all the x-ray stuff except ultrasounds for OB**			
76499	Radiographic procedure	0	no	6

Using AFMS data for month of June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
76519	Echo exam of eye	2.47	no	19
76705	Echo exam of abdomen	2.3	no,not obstetrical	24
76775	Us eam abdo back wall, lim	2.29	no	6
76818	Fetal biophys profile w/nst	3.18	no	4
76819	Fetal biophys profil w/o nst	2.77	no	6
76825	Echo exam of fetal heart	4.4	not fetal heart tones	52
76827	Echo exam of fetal heart	2.63	not fetal heart tones	121
76872	Echo exam, transrectal	2.62	doubt,non-ob	42
76880	Us exam, extremity	2.3	no	3
76942	Echo guide for biopsy	3.97	no	5
76999	Echo examination procedure	0	no	16
77417	Radiology port film(s)	0.62	no	33
77427	Radiation tx management, x5	4.57	doubt	69
78465	Heart image (3d), multiple	14.3	no	18

Using AFMS data for month of June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
80500	Lab pathology consultation	0.55	no	5
80502	Lab pathology consultation	1.98	no	3
82003	Assay of acetaminophen	0	no	4
82962	Glucose blood test	0	doubt,not strip	34
84210	Assay of pyruvate	0	no	7
84702	Chorionic gonadotropin test	0	no	17
84703	Chorionic gonadotropin assay	0	no	20
84999	Clinical chemistry test	0	no	13
85060	Blood smear interpretation	0.66	no	9
86060	Antistreptolysin o, titer	0	no	6
86631	Chlamydia antibody	0	no	8
86750	Malaria antibody	0	no	4
87070	Culture, bacteria, other	0	no	199
87075	Culture bacteria anaerobic	0	no	9
87081	Culture screen only	0	no	170
87084	Culture of specimen by kit	0	no	3
87101	Skin fungi culture	0	no	5
87109	Mycoplasma	0	no	7
87110	Chlamydia culture	0	no	151

Using AFMS data for month of June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
87158	Culture typing, added method	0	no	18
87220	Tissue exam for fungi	0	no, lab test	375
87622	Hpv, dna, quant	0	no	17
87880	Strep a assay w/optic	0	doubt	156
87999	Microbiology procedure	0	no	7
88141	Cytopath, c/v, interpret	1.42	no	4
88142	Cytopath, c/v, thin layer	0	no	55
88160	Cytopath smear, other source	1.52	no	7
88199	Cytopathology procedure	0	no	14
89360	Collect sweat for test	0.47	doubt	5
90845	**Psychoanalysis**	2.4	doubt,use therapy	111
90862	**Medication management**	1.3	w/o therapy or E&M	1818
92283	**Color vision examination**	1.05	doubt	149
92567	**Tympanometry**	0.57	usually Audiology/ENT	656

Using AFMS data for month of June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
93307	Echo exam of heart	5.34	doubt,not fetal heart tones	130
93308	Echo exam of heart	2.8	**not fetal heart tones**	16
93325	Doppler color flow add-on	3.17	not as 1st code,add-on	27
93770	Measure venous pressure	0.26	questionable,not BP	259
93784	Ambulatory BP monitoring	1.17	**not BP**	659
93786	Ambulatory BP recording	0.92	not BP	244
94060	Evaluation of wheezing	1.89	spirometry pre/post bronchodilator	124
94760	**Measure blood oxygen level**	0.11	med indicated	5185
96412	Chemo, infuse method add-on	1.2	not at 1st procedure	55
96414	Chemo, infuse method add-on	1.4	not as 1st code,add-on	6
97116	Gait training therapy	0.67	**in PT**	596
97535	Self care mngment training	0.83	**use in OT**	886
99000	Specimen handling	0	no	890
99001	Specimen handling	0	no	25
99183	**Hyperbaric oxygen therapy**	3.21	excellent,glad to see	60

Using AFMS data for June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
A4208	3 CC sterile syringe&needle	0	no	7
A4580	Cast supplies (plaster)	0	not if coding casting	25
A4663	Dialysis blood pressure cuff	0	DME, why?	4
A4670	Automatic bp monitor, dial	0	no DME issue	5
A4773	Occult blood test strips	0	no,box of 50 for dialysis	20
A6260	Wound cleanser any type/size	0	doubt	43
D1310	Nutri counsel-control caries	0	no dental	5
D1320	Tobacco counseling	0	dental,don't use	14
D1330	Oral hygiene instruction	0	no dental	6
D4920	Unscheduled dressing change	0	no,dental	39
D7410	Rad exc lesion up to 1.25 cm	0	no dental	8
D7411	Excision benign lesion>1.25c	0	no dental	3
D7520	I&d abscess extraoral	0	use CPT code,this is dental	6
D7910	Dent sutur recent wnd to 5cm	0	doubt,dental	10
D9211	Regional block anesthesia	0	no dental	4
D9215	Local anesthesia	0	no dental	5

Using AFMS data for June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
E0218	WATER CRCULAT COLD PAD W/ PUMP		DME issue?	3
E0607	HOME BLOOD GLUCOSE MONITOR		no DME issue	4
E0730	TENS, 4 LEAD, MULTI NERVE STIM		doubt,DME issue	14
E1390	OXYGEN CONCENTRATOR,DEL 85% /+		DME issue?	3
E1399	MISC DURABLE MEDICAL EQUIPMNT		no DME issue	4
E2101	BLD GLUCOSE MONITOR W LANCE		DME issue?	3
G0001	Drawing blood for specimen	0	no	21
G0010	Admin hepatitis b vaccine	0	**use CPT code**	3
G0101	CA screen;pelvic/breast exam	0.63	not with 9938x/9939x	1220
G0103	Psa, total screening	0	no,lab	14
G0104	CA screen;flexi sigmoidscope	1.53	use flex sig 45330	50
G0105	Colorectal scrn; hi risk ind	5.62	use flex sig?	6
G0121	Colon ca scrn not hi rsk ind	5.62	use flex sig?	6
H0005	Alcohol and/or drug services	0	?	198

Using AFMS data for June 03

Common Procedure/HCPCS Coding Errors

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Procedure	Description	TotFac RVU		AFMS#
P3000	Screen pap by tech w md supv	0	no Q0091	14
P3001	Screening pap smear by phys	1.42	no Q0091	13
P7001	Culture bacterial urine	0	no	24
Q4010	Cast sup sht arm adult fbrgl	0	**use CPT code**	4
Q4021	Cast sup sht arm splint plst	0	use cast CPT	7
Q4037	Cast sup shrt leg plaster	0	use cast CPT	8
Q4041	Cast sup lng leg splnt plstr	0	use CPT code	5
Q4045	Cast sup sht leg splnt plstr	0	use cast CPT	9
Q4046	Cast sup sht leg splnt fbrgl	0	use CPT code	4
Q4049	Finger splint, static	0	use 29130	28
Q4051	Splint supplies misc	0	use CPT code	4
R0076	**Transport portable EKG**	0	no,to separate bldg	65
S0260	H&P for surgery	0	no,use E&M	20
S0610	Annual gynecological exam	0	use 9938x/9939x	81
S0612	Annual gynecological exam	0	no,use 9938x/9939x	253
S8450	Splint digit	0	use 29130/29131	14
S8452	Splint elbow	0	use CPT code	5
S9470	Nutritional counseling, diet	0	use 97802/3/4	69
V5008	Hearing screening	0	no see 92551-92597	56

Using AFMS data for June 05

As of:

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Common HCPCS Coding Errors

- I don't see these being used. If they are helpful to your practice, consider coding them. Many are associated with reimbursement, though many insurance plans do not cover glasses or hearing aids
- Issuing of glasses and contact lenses (V0000-V2999)
- Issuing of hearing aids/ear molds (V5000-V5999)
- Issuing orthotic devices (L0000-L4999)

- **Prolotherapy – do not code trigger point injections if the intent is to destroy the focus of the pain – use the M0076 Prolotherapy code (not seeing it used but know some providers are doing it)**

Let's Look At Some Examples – Physical Therapy

BLA (Physical Therapy Clinic) E&M Report: Jun 2003					
E&M	E&M	Site BLA		AFMS BLA	
Code	Description	BLA#	BLA%	AFMS#	AFMS%
99499	Unlisted e&m service	546	77.2	28175	66.3
99211	Office/outpatient visit, est	135	19	13063	30.7
99214	Office/outpatient visit, est	26	3.6	59	0.1
What are these 99214?					

Let's Look At Some Examples - Optometry

E&M	Description	BHC#	BHC%	AFMS#	AFMS%
99499	Unlisted e&m service	348	76.3	18340	80
99212	Office/outpt visit, est	67	14.6	1273	5.5
99211	Office/outpt visit, est	22	4.8	201	0.8
99242	Office consultation	9	1.9	33	0.1
99203	Office/outpt visit, new	5	1	316	1.3
99202	Office/outpt visit, new	2	0.4	186	0.8
99244	Office consultation	1	0.2	1	0
99243	Office consultation	1	0.2	13	0
99213	Office/outpt visit, est	1	0.2	566	2.4
Expected 99499 and 99211 with optometry 92xxx codes					

As of: 1 month in summer 2003

Let's Look At Some Examples - Optometry

BHC (Optometry Clinic) Primary CPT Report: Jun 2003

CPT	Description	BHC#	BHC%	AFMS#	AFMS%
92002	Eye exam, new patient	129	28.2	2401	10.4
92015	Refraction	94	20.6	4318	18.8
92012	Eye exam established pat	91	19.9	4364	19
92004	Eye exam, new patient	50	10.9	4077	17.7
	no procedure	49	10.7	1432	6.2
92014	Eye exam & treatment	13	2.8	3074	13.4
92499	Eye service or procedure	10	2.1	174	0.7
92082	Visual field examination(s)	8	1.7	73	0.3
92340	Fitting of spectacles	4	0.8	303	1.3
92083	Visual field examination(s)	4	0.8	340	1.4
92326	Replacement of contact lens	3	0.6	52	0.2
92081	Visual field examination(s)	1	0.2	14	0

Last Database Load: Jul 29

New looks a bit high, but perhaps with overseas. New is new to clinic, not new to provider.

Good, coding refractions separately.

Only 3 replacement of contact lenses - is that all the contact work?

What about issuing glasses - all the V HCPCS codes?

Are they using the optometry tech super bill?

As of: 1 month in summer 2003

Let's Look At Some Examples – Nutritional Medicine

BAL (Nutrition Clinic) E&M Report: Jun 2003					
E&M	Description	BAL#	BAL%	AFMS#	AFMS%
99499	Unlisted e&m service	98	100	2834	43.9

This indicates only dieticians, no diet therapy technicians. Questionable.

BAL (Nutrition Clinic) Primary CPT Report: Jun 2003					
Code	Description	BAL#	BAL%	AFMS#	AFMS%
99071	Patient education materials	98	100	153	2.3

Oops, was expecting 98702/3/4 and maybe 99411/12.
This clinic is getting no RVUs.

As of: 1 month in summer 2003

Let's Look At Some Examples – Mental Health

BFD (Mental Health Clinic) E&M Report: Jun 2003						
Code	Description	BFD#	BFD%	AFMS#	AFMS%	Delta
99499	Unlisted e&m service	480	97.7	10988	81.4	16.3
99211	Office/outpatient visit, est	4	0.8	103	0.7	0.1
99205	Office/outpatient visit, new	3	0.6	102	0.7	0
99358	Prolonged serv, w/o contact	2	0.4	2	0	0.4
99349	Home visit, est patient	1	0.2	1	0	0.2
99299	Ic, lbw infant 1500-2500 gm	1	0.2	5	0	0.2
Not sure what the 4 nurse/tech 99211 are						
Mental Health would not be doing E&Ms, they would do 908xx, look at 99205s						
Mental Health would not be doing 99349 (not approved for any use in DoD yet)						
Mental Health not usually doing infant intensive care, looks like 99499 + 99211?						

As of: 1 month in summer 2003

Let's Look At Some Examples – Mental Health

BFD (Mental Health Clinic) Primary CPT Report: Jun 2003						
Code	Description	BFD#	BFD%	AFMS#	AFMS%	Delta
90862	Medication management	134	27.2	828	6.1	21.1
90845	Psychoanalysis	110	22.4	111	0.8	21.6
90853	Group psychotherapy	72	14.6	977	7.2	7.4
90806	Psytx, off, 45-50 min	50	10.1	4077	30.2	-20
90846	Family psytx w/o patient	44	8.9	63	0.4	8.5
90801	Psy dx interview	37	7.5	2073	15.3	-7.7
90899	Psychiatric service/therapy	25	5	244	1.8	3.2
	no procedure code	9	1.8	892	6.6	-4.7
90808	Psytx, office, 75-80 min	4	0.8	178	1.3	-0.4
90847	Family psytx w/patient	3	0.6	408	3	-2.3
90802	Intac psy dx interview	2	0.4	71	0.5	0
90887	Consultation with family	1	0.2	267	1.9	-1.6
		491				
Looks like the 99358 was linked with a procedure						
Looks like the 99211, 99205, 99349 and 99299 had no procedure						

As of: 1 month in summer 2003

Let's Look At Some Examples – Social Work

BFE (Social Work Clinic) E&M Report: Jun 2003						
E&M	E&M	Site BFE		AFMS BFE		
Code	Description	BFE#	BFE%	AFMS#	AFMS%	Delta
99499	Unlisted e&m service	47	81	1656	58	23
99213	Office/outpatient visit, est	11	18.9	89	3.1	15.8
Don't expect 99213.						

BFE (Social Work Clinic) Primary CPT Report: Jun 2003						
Code	Description	BFE#	BFE%	AFMS#	AFMS%	Delta
	no procedure	46	79.3	667	23.3	56
90899	Psychiatric service/therapy	12	20.6	152	5.3	15.3
Usually there is a procedure. In this case, looks like the 47 w/o procedure are 99499s						
The 12 with procedures are 99213. Recommend looking at this clinic.						

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Bottom Line

If you haven't already, recommend you glance at

- Physical Therapy
  - 1st dx is usually V57.1 (use education code if doing education class)
  - 2nd dx, is symptom or residual; not original injury
    - Ex: Code Stiffness, joint (719.51)
    - Do not code fracture, sprain, dislocation, etc.
  - E&M – 99499 for Physical Therapist, 99211 for tech
  - Procedures, BLAA 97001/2, BLAB no 97001/2
- Occupational Therapy
  - 1st dx of V57.21
  - 2nd dx, should be a symptom or residual; not necessarily original injury
    - Do not code the original injury (head injury or stroke)
  - E&M – 99499 for therapist, 99211 for tech
  - Procedures, therapist 97003/4, tech no 97003/4

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Bottom Line

- Optometry and Ophthalmology
  - 1st dx, should be reason for seeking care
  - 2nd dx, should be problems identified
  - E&M, provider is 99499, tech 99211
  - Procedures, should be 920xx and 921xx, be sure to code refractions along with eye care
- Mental Health
  - E&M should be 99499 for provider, 99211 for tech
  - Procedure should be in 908xx

Bottom Line

- **Nutritional Medicine**
  - 1st dx of V65.3 (usually)
  - 2nd dx, should be disease such as HTN, DM, obesity, hypercholesterolemia
  - E&M – 99499 for therapist, 99211 for tech
  - Procedures, BALA and BALB 97802/3/4 and 99411/12

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